BEST PRACTICES AWARDS

Application form and portfolios must be postmarked on or before March 1, 2006.

Name of Organization:							
Address: _							
City:	State: ZIP:						
Phone:	· · · · · · · · · · · · · · · · · · ·	Fax:	E	E-mail:			
Name of pe	erson submitting	nomination:					
Title:							
Address:_							
City:		State: _	ZIF	P:			
Phone:		Fax:	E-r	mail:			
Name of Pr	ogram or Event:						
Award Cate	gories			Please check award category			
В. (Single Unit or Goven 1. With agend 2. With agend	cy budgets up to \$1, cy budgets over \$1,0 by two or more units	000,000	rernment (special recreation			
	2. With agend	cy budgets over \$1,0	000,000	🛚			
A. V	0 , 0	•					
3. Not-for-p	profit						
A. V	With agency budge	ets up to \$250,000 .		🗆			
B. V				[
Thank you fo		y one award nomina e Illinois Attorney Gene					

Program recognizing recreation opportunities for people with disabilities.

Please return your submission, postmarked on or before March 1, 2006 to:

Recreation Access Illinois, 211 E. Monroe St., Springfield, IL 62701-1186